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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Peter Hartmaier, et al.

Application No.: 09/973,479

Filed: October 8, 2001

Group Art Unit: 2681

Examiner: Not Yet Assigned

For: MOBILITY EXTENDED TELEPHONE
APPLICATION PROGRAMMING
INTERFACE AND METHOD OF USE

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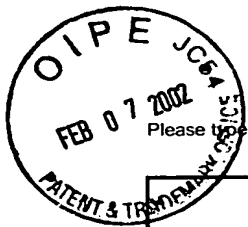
Dated: 1/15/02 Signature: Eileen Cortez
(Eileen Cortez)

PRELIMINARY AMENDMENT

Commissioner for Patents
Washington, DC 20231

Dear Sir:

Prior to examination on the merits, please amend the above-identified U.S. patent application as indicated below.



Please type a plus sign inside this box → ☐

Section 113

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | | Application Number | 09/973,479 |
| | | Filing Date | October 8, 2001 |
| | | First Named Inventor | Peter Hartmaier |
| | | Group Art Unit | 2681 |
| | | Examiner Name | Not Yet Assigned |
| Total Number of Pages in This Submission | | Attorney Docket Number | 51410/P001CP1C1CP1/10105303 |

| ENCLOSURES (check all that apply) | | |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) Inventor Declarations IDS References (62 documents) |
| Remarks | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--|
| Firm Or Individual Name | FULBRIGHT & JAWORSKI L.L.P. Michael J. Fogarty, III |
| Signature | <i>Michael J. Fogarty</i> |
| Date | January 15, 2002 |

| Transmittal | |
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